

EXHIBIT

A

EEOC Form 5 (11/09)

CHARGE OF DISCRIMINATION This form is affected by the Privacy Act of 1974. See enclosed Privacy Act Statement and other information before completing this form.		Charge Presented To: Agency(ies) Charge No(s): <input type="checkbox"/> FEPA <input checked="" type="checkbox"/> EEOC 420-2021-02416	
_____ State or local Agency, if any			and EEOC
Name (indicate Mr., Ms., Mrs.) MR. CURTIS L MCCUNE III		Home Phone 205-807-2699	Year of Birth 1960
Street Address 5586 PARK SIDE CIRCLE, HOOVER, AL 35244		City, State and ZIP Code	
Named is the Employer, Labor Organization, Employment Agency, Apprenticeship Committee, or State or Local Government Agency That I Believe Discriminated Against Me or Others. (If more than two, list under PARTICULARS below.)			
Name JEFFERSON COUNTY		No. Employees, Members 501+	Phone No. (205) 325-5688
Street Address 716 RICHARD ARRINGTON BLVD, BIRMINGHAM, AL 35203		City, State and ZIP Code	
Name		No. Employees, Members	Phone No.
Street Address		City, State and ZIP Code	
DISCRIMINATION BASED ON (Check appropriate box(es).) <input checked="" type="checkbox"/> RACE <input type="checkbox"/> COLOR <input type="checkbox"/> SEX <input type="checkbox"/> RELIGION <input type="checkbox"/> NATIONAL ORIGIN <input type="checkbox"/> RETALIATION <input type="checkbox"/> AGE <input type="checkbox"/> DISABILITY <input type="checkbox"/> GENETIC INFORMATION <input type="checkbox"/> OTHER (Specify)		DATE(S) DISCRIMINATION TOOK PLACE Earliest Latest 06-30-2021 06-30-2021 <input type="checkbox"/> CONTINUING ACTION	
THE PARTICULARS ARE (If additional paper is needed, attach extra sheet(s)): I am a white male. I was hired by the above-named employer in October 2014 as a Deputy Sheriff. I currently hold the position of Sergeant assigned to the Jefferson County Jail. For approximately 2 years, I have faced pervasive discriminatory harassment from my supervisor, Lieutenant Terry Guinn (B/M). Most recently, on June 30, 2021, I was summoned to my supervisors office. Another Jail Sergeant, April Johnson (B/F) was also called to the office for the same disciplinary purpose. I received two disciplinary write ups. Johnson received no disciplinary write ups. Guinn also began yelling at me specifically during this meeting. Due to the cumulative ongoing stress of pervasive harassment from Lt. Guinn, I was overwhelmed in that moment and suffered a serious medical incident. I was transported by ambulance to the hospital. The doctor documented his opinion that my work environment was the primary contributor to the serious medical incident. I believe I was subjected to ongoing harassment and disparate treatment due to my			
I want this charge filed with both the EEOC and the State or local Agency, if any. I will advise the agencies if I change my address or phone number and I will cooperate fully with them in the processing of my charge in accordance with their procedures.		NOTARY - When necessary for State and Local Agency Requirements	
I declare under penalty of perjury that the above is true and correct.		I swear or affirm that I have read the above charge and that it is true to the best of my knowledge, information and belief. SIGNATURE OF COMPLAINANT SUBSCRIBED AND SWORN TO BEFORE ME THIS DATE (month, day, year)	

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<p align="center">CHARGE OF DISCRIMINATION</p> <p>This form is affected by the Privacy Act of 1974. See enclosed Privacy Act Statement and other information before completing this form.</p>	<p>Charge Presented To: Agency(ies) Charge No(s):</p> <p><input type="checkbox"/> FEPA</p> <p><input checked="" type="checkbox"/> EEOC 420-2021-02416</p>
<p align="center">_____ <i>State or local Agency, if any</i></p>	<p>and EEOC</p>
<p>protected class, White, in violation of Title VII of the Civil Rights Act of 1964, as amended.</p>	

<p>I want this charge filed with both the EEOC and the State or local Agency, if any. I will advise the agencies if I change my address or phone number and I will cooperate fully with them in the processing of my charge in accordance with their procedures.</p>	<p>NOTARY - <i>When necessary for State and Local Agency Requirements</i></p>
<p>I declare under penalty of perjury that the above is true and correct.</p>	<p>I swear or affirm that I have read the above charge and that it is true to the best of my knowledge, information and belief.</p> <p>SIGNATURE OF COMPLAINANT</p> <p>SUBSCRIBED AND SWORN TO BEFORE ME THIS DATE (month, day, year)</p>